

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		5	7-06-01
FORMALITY REVIEW	MP	579	8/17/01
RESPONSE FORMALITY REVIEW	A.M. JC	580	03-17-02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	10/1/01
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Claim	Date
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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50-78  
03-07-02  
286  
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